## PETITION FOR REASONABLE PETITION REQUIREMENTS FOR VOTER REFERENDUM

We, the undersigned, petition the Austin City Council for a public vote to secure the right to petition for voter referendum. The right to voter referendum – to reverse or uphold a City Council decision -- is guaranteed by the Texas constitution. The city of Austin, on its own website states that its petition requirements "generally cannot be met" due to a clause that allows the City Council to eliminate the time window for collection of signatures. This proposed charter amendment, for which we, the undersigned call upon the Austin City Council to place on the ballot for a public vote, is as follows:

## § 2. - POWER OF REFERENDUM.

The people reserve the power to approve or reject at the polls any ordinance enacted by the council which is subject to the initiative process under this Charter, except an ordinance which is enacted for the immediate preservation of the public peace, health or safety, which contains a statement of its urgency, and which is adopted by the favorable votes of eight (8) or more of the councilmembers. A group of least five (5) registered voters of the City of Austin may make application to the city clerk within 30 days of the enactment of such ordinance, and file an intention to circulate a petition for referendum that identifies the proposed ordinance to be circulated. A petition signed by qualified voters of the city equal in number to the number of signatures required by state law to initiate an amendment to this Charter may be filed with the city clerk within 180 days of filing an intent to circulate a petition requesting that any such ordinance be either repealed or submitted to a vote of the people. When such a petition has been certified as sufficient by the city clerk, the ordinance specified in the petition shall not go into effect, or further action thereunder shall be suspended if it shall have gone into effect, until and unless it is approved by the voters as herein provided.

## ONLY REGISTERED VOTERS IN THE CITY OF AUSTIN MAY SIGN THIS PETITION. Please fill in ALL blanks that are NOT optional. If you circulated this petition beyond your household, please print your name here: \_\_\_\_\_\_\_ and your phone number here: \_\_\_\_\_\_\_. Thank you!

DATE SIGNED	NAME (please print clearly)SIGNATURE	STREET ADDRESS	COUNTY (check one)	D.O.B. or VOTER REGISTRATION	EMAIL (optional)  PHONE (optional)
/	Print name below:	Street no. and name:	Travis	//19 OR	
20	Sign name below:	Austin TX Zip code:	☐ Williamson	Voter no	
/	Print name below:	Street no. and name:	Travis	/19	
20	Sign name below:	Austin TX Zip code:	☐ Williamson	OR Voter no	
/	Print name below:	Street no. and name:	Travis	//19	
20	Sign name below:	Austin TX Zip code:	Williamson	OR Voter no	
,	Print name below:	Street no. and name:	☐ Travis	/19	
20	Sign name below:	Austin TX Zip code:	☐ Williamson	OR Voter no	
/	Print name below:	Street no. and name:	☐ Travis	//19	
20	Sign name below:	Austin TX Zip code:	☐ Williamson	OR Voter no	